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210 7590

03/23/2007

MERCK AND CO., INC
P O BOX 2000
RAHWAY, NJ 07065-0907

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Barbara Muller	(Depositor's name)
<i>Barbara Muller</i>	
(Signature)	
June 12, 2007	
(Date)	

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
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10/537,758	06/06/2005	Mark E. Fraley	20977P 06/14/2007 NNGUYEN2 00000045 132755	5494 10537758
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TITLE OF INVENTION: TYROSINE KINASE INHIBITORS

01 FC:1501	1400.00 DA
02 FC:1504	300.00 DA
03 FC:8001	18.00 DA

APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSUE FEE	TOTAL FEE(S) DUE	DATE DUE
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nonprovisional	NO	\$1400	\$300	\$0	\$1700	06/25/2007
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EXAMINER	ART UNIT	CLASS-SUBCLASS
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BALASUBRAMANIAN, VENKATARAMAN	1624	514-259300
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1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.
 "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.

2. For printing on the patent front page, list

(1) the names of up to 3 registered patent attorneys or agents OR, alternatively,
(2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

1 Nicole M. Beeler

2 David M. Muthard

3 _____

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

Merck & Co., Inc.

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

Rahway, New Jersey

Three (3) assignments recorded on 12/16/2005 on Reel/Frame 017126/0862

Please check the appropriate assignee category or categories (will not be printed on the patent): Individual Corporation or other private group entity Government

4a. The following fee(s) are submitted:

Issue Fee
 Publication Fee (No small entity discount permitted)
 Advance Order - # of Copies 6

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A check is enclosed.
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 The Director is hereby authorized to charge the deposit account(s), any deficiency, or credit any overpayment, to Deposit Account Number 132755 (enclose an extra copy of this form).

5. Change in Entity Status (from status indicated above)

a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27. b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

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Authorized Signature

Nicole M. Beeler

Date June 12, 2007

Typed or printed name Nicole M. Beeler

Registration No. 45,194

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